Form

North Dakota Office of State Tax Commissioner



ND-1 Individual income tax return 2005

Please type or print in black or blue ink. See page 16 of instructions for the proper way to fill out this form.

Your Social Security Number	Spouse's Social Security	Number	Fill in if this is a
400007712	400007713		COMPOSITE RETURN O (CF)
Your name (First, MI, Last name) Test J Caesar			► If fiscal year filer, enter fiscal year end: (See page 9)
If joint return, spouse's name (First, MI, Last name) Cleo P Caesar			
Mailing address 15 Ides of March Pkwy			MM/DD/YYYY ► Fill in only if applicable: O Amended
City Bismarck	State ND	Zip code 58501	(See page 9) C Extension
	eparately - enter spouse's name	ow(er) with dependent child	► Were you required to pay estimated federal income tax for 2005? (See page 9) O Yes O No
(See page 17) - 001	(See page 9)	<u>)</u>	US Dollars
D. Federal adjusted gross income fro			62,255.00
or line 4 of Form 1040EZ		(SX) D[32,255.60
1. Federal taxable income from line 43 or line 6 of Form 1040EZ (If zero, see page		-	39,455.00
Additions			
2. Lump-sum distribution from Federal Form	n 4972 (NA) 2		
3. Loss from pass-through entity subject to I financial institution tax (Attach statement	from entity) _ (NB) 3		
 Adjustment to federal taxable income, if of planned gift credit (From Schedule PG, In 			
5. Add lines 1, 2, 3, and 4			39,830.00
Subtractions			
6. Interest from U.S. obligations (Attach supporting statement)	(SN) 6 200.00		
7. Net long-term capital gain exclusion (From worksheet on page 10 of instruction			
8. Exempt income of a Native American	(S4) 8		
9. Benefits received from U.S. Railroad Ret	irement Board		
(Attach copy of Form RRB-1099, RRB-10 10. Income from pass-through entity subject to			
financial institution tax (Attach statement	l l		
11. Renaissance zone income exemption (Attach Schedule RZ)	(S7) 11		
12. New or expanding business income exem			
N.D.C.C. ch. 40-57.1 (Attach supporting 13. National Guard/Reserve member federal a	-		
pay exclusion (Attach copy of mobilization	on orders) (NI) 13		
 Nonresident only: Servicemembers Civil adjustment (See page 11 of instructions) 	Relief Act (NJ) 14		
15. Human organ donor expense deduction (Attach supporting statement)	(211.) 15		
16. North Dakota taxable income. Sul	otract lines 6 through 15 from line 5		
If less than zero, enter 0		(ND) 16	39,630.00
17. Tax. Enter the tax as explained below:		(SB) 17	832.00
If full-year resident, enter amount			

North Dakota Office of State Tax Commissioner 2005 Form ND-1, page 2			<u> </u>		S Dollars
18. Enter your tax from line 17 of page 1				32.00	
19. Credit for income tax paid to another state (Attach Schedule CR)	(SD) 19	350.00			
20. Family member care credit (Attach Schedule FC)	(S2) 20				
 21. Renaissance zone credit (Attach Schedule RZ) 22. Ag commodity investment credit (from worksheet on page 11 of instructions) (Attach copy of investment reporting form) 	(S3) 21 (NE) 22				
23. Seed capital investment credit (from worksheet on page 12 of instructions) (Attach copy of investment reporting form)	(NG) 23				
24. Credit for planned gift to qualified North Dakota nonprofit organization. (From Schedule PG, line 7)	(NM) 24				
25. Credit for biodiesel fuel supplier (Attach supporting statement)	(NN) 25				
26. Credit for biodiesel fuel seller (Attach supporting statement)	(NO) 26				
27. Net tax liability. Subtract lines 19 through 26 from line 18. Withholding and/or tax already paid	. If less ti	han zero, ent	er 0 (SE) 27 482.00	
28. North Dakota withholding (Attach supporting W-2s and 1099s)	(SF) 28	465.00			
29. Estimated tax paid, including extension payment on Form 400-EXT and overpayment applied from 2004 return	(S&) 29				
30. Total payments. Add lines 28 and 29				30 465.00	
Refund					
31. Overpayment - If line 30 is MORE than line 27, subtract lin otherwise, go to line 36. If result is less than \$5.00, en		ne 30 and enter		6G) 31	
32. Amount of line 31 that you want applied to your 2006 estimated tax	(SQ) 32				
33. Amount of line 31 that you wish to contribute to the Watchable Wildlife Fund	(SP) 33				
34. Amount of line 31 that you wish to contribute to the Trees For ND Program Trust Fund	(SW) 34				
35. Refund. Subtract lines 32 through 34 from line 31. If resu	It is less t	han \$5.00, e	nter 0 (SR) 35	
To direct deposit your refund, complete items a, b,					C. Type of account: O Checking
and c. (See page 15.) b. Account number:					O Savings
Tax Due 36. Tax due - If line 30 is LESS than line 27, subtract line 30 from	m line 27 an	d enter result.		17.00	
If result is less than \$5.00, enter 0 37. Amount that you wish to contribute to the Watchable			(SZ) 36 17.00	
Wildlife Fund (but only if there is a tax due on line 36)	(SU) 37				
38. Amount that you wish to contribute to the Trees For ND Program Trust Fund (but only if there is a tax due on line 36) -	(SY) 38	111111111111111111111111111111111111111			
39. Balance due. Add lines 36, 37, 38, and, if applicable, line 40 Pay to: ND State Tax Commissioner). 			39 17.00	
40. Interest on underpaid estimated tax from Form 400-UT	(SO) 40				
I declare under the penalties of North Dakota Century Code §12.1-11-02, which provide accompanying schedules and statements, has been examined by me, and to the best of m			-	-	
Your signature Date	Your daytime	phone number	OPR 🔘	Tax Depart	ment use only
Spouse's signature		Date			
Signature of paid preparer EIN/SSN/PTI	IN	Date			
► Attach a copy of your 2005 federal income tax					
► Do not file a photocopy of this specially-colore ► Mail to: Office of State Tax Commissioner, 600		ard Ave.,	0		ļ
Dept. 127, Bismarck, ND 58505-0550			\cup		

Schedule

North Dakota Office of State Tax Commissioner



ND-1CR Calculation of credit for income tax paid to another state

2005
Attach to Form ND-1

Please type or print in black or blue ink. Enter one letter or number in each box.

est J Caesar	400-00-7712
ne of state or U.S. territory to which you paid tax on income that is also taxed by North Dakota	
innesota	
	••••
ull-year resident and part-year resident	See instructions on
Part-year resident: Complete this schedule <i>only if</i> the amount on Schedule ND-1NR, line 16, includes income that (1) has its source in another state <i>and</i> (2) was received or earned while a North Dakota resident.	back of this schedule. ———————————————————————————————————
Federal adjusted gross income from Form ND-1, line D	1a 62,255.00
b. How much of the amount on line 1a has its source in the other state? If none, stop here; you are not eligible for this credit. See instructions for proper amount to enter here	12,000.00
c. Full-year resident: Enter the amount from line 1b.	
Part-year resident: How much of the amount on line 1b did you receive or earn while a North Dakota resident? If none, stop here; you are not eligible for this credit.	12,000.00
See instructions for proper amount to enter here	(58) 1c
Enter the applicable amount for your residency status as follows (SJ	62,055.00
 Full-year resident - Enter the amount from Form ND-1, line D, after reducing it by any interest from U.S. obligations on Form ND-1, line 6. Part-year resident - Enter the amount from Schedule ND-1NR, line 16. 	
Divide line 1c by line 2. Round to nearest two decimal places. If line 1c is equal to or more than line 2, enter 1.00	3 0.19
Enter the amount of your North Dakota tax from Form ND-1, line 17	4 832.00
Multiply line 4 by line 3	(51.) 5 158.00
Multiply line 4 by line 3 Enter the amount of income tax paid to the other state. See instructions for proper amount to enter here	(SM) 6 400.00
 If a full-year resident, go to line 7. If a part-year resident, skip line 7 and complete lines 8 through 11. 	(317)
ull-year resident only	••••
un-year resident only	150.00
Credit - Enter the smaller of line 5 or line 6. Enter this amount on Form ND-1, line 19	7
	••••
art-year resident only	
Enter the amount from line 1b	(SK) 8
Divide line 1c by line 8. Round to nearest two decimal places. If line 1c is equal to or more than line 8, enter 1.00	ı
Multiply line 6 by line 9	(\$9) 10
Credit - Enter the smaller of line 5 or line 10. Enter this amount on Form ND-1, line 19	11
To obtain this credit, you must attach the following to your F	

Schedule

North Dakota Office of State Tax Commissioner



ND-1CR Calculation of credit for income tax paid to another state

2005 Attach to Form ND-1

est J Caesar	400-00-7712		
me of state or U.S. territory to which you paid tax on income that is also taxed by North Dakota			
(ississippi			
	••••		
ull-year resident and part-year resident	See instructions on		
Part-year resident: Complete this schedule <i>only if</i> the amount on Schedule ND-1NR, line 16, includes income that (1) has its source in another state <i>and</i> (2) was received or earned while a North Dakota resident.	back of this schedule.		
Federal adjusted gross income from Form ND-1, line D	62,255.00		
b. How much of the amount on line 1a has its source in the other state? If none, stop here; you are not eligible for this credit. See instructions for proper amount to enter here	16,000.00		
c. Full-year resident: Enter the amount from line 1b.			
Part-year resident: How much of the amount on line 1b did you receive or earn while a North Dakota resident? If none, stop here; you are not eligible for this credit. See instructions for proper amount to enter here	(S8) 1c 16,000.00		
Enter the applicable amount for your residency status as follows (SJ			
 Full-year resident - Enter the amount from Form ND-1, line D, after reducing it by any interest from U.S. obligations on Form ND-1, line 6. Part-year resident - Enter the amount from Schedule ND-1NR, line 16. 	, -		
Divide line 1c by line 2. Round to nearest two decimal places. If line 1c is equal to or more than line 2, enter 1.00	3 0.26		
Enter the amount of your North Dakota tax from Form ND-1, line 17	832.00		
Multiply line 4 by line 3	(\$1.) 5 216.00		
Enter the amount of income tax paid to the other state. See instructions for proper amount to enter here	192.00		
 If a full-year resident, go to line 7. If a part-year resident, skip line 7 and complete lines 8 through 11. 			
ull-year resident only	••••		
Credit - Enter the smaller of line 5 or line 6. Enter this amount on Form ND-1, line 19	7 192.00		

art-year resident only			
Enter the amount from line 1b	(SK) 8		
line 8, enter 1.00	9		
Multiply line 6 by line 9	(\$9) 10		
Credit - Enter the smaller of line 5 or line 10. Enter this amount on Form ND-1, line 19	11		
To obtain this credit, you must attach the following to your Fo	orm ND-1:		
► Schedule ND-1CR.			